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MAR 14 2005

## FACSIMILE COVER SHEET

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TO: Mail Stop AF -- Commissioner for Patents -- U.S. Patent Office

FAX NO.: (703) 872-9306

FROM: Kin-Wah Tong

DATE: March 14, 2005

MATTER: Serial No. 09/778,254 Filed: 2/7/01

DOCKET NO.: ATT/ 2000-0192

APPLICANT: Cimini Jr.

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

☐ Petition  
☐ Disclosure Statement & PTO-1449  
☐ Priority Document  
☐ Drawings (\_\_\_ sheets) informal  
☒ Response to Final Office Action

☒ Transmittal Letter (2 copies)  
☒ Fee Transmittal (2 copies)  
☒ Deposit Account Transaction  
☒ Facsimile Transmission Certificate  
dated March 14, 2005

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Kathleen Faughnan  
Name of person signing this certificate

Kathleen Shinn 3/14/05  
Signature and date

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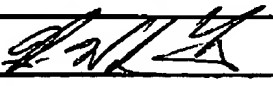
PTO/SB/21 (09-04)

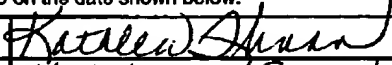
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/778,254
	Filing Date	2/7/01
	First Named Inventor	Cimini Jr.
	Art Unit	2662
	Examiner Name	John Pezzlo
Total Number of Pages in This Submission	Attorney Docket Number	ATT 2000-0192

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm	Moser, Patterson & Sheridan LLP	
Signature		
Printed Name	Kin-Wah Tong	
Date	3/14/05	Reg. No. 39,400

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Signature			
Typed or printed name	Kathleen Faughnan	Date	March 14, 2005

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348283-1

PTO/SB/21 (09-04)


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<b>TRANSMITTAL FORM</b>	Application Number	09/778,254
	Filing Date	2/7/01
	First Named Inventor	Cimini Jr.
	Art Unit	2662
	Examiner Name	John Pezzlo
(to be used for all correspondence after initial filing)		
Total Number of Pages in This Submission		Attorney Docket Number ATT 2000-0192

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Moser, Patterson & Sheridan LLP		
Signature			
Printed Name	Kin-Wah Tong		
Date	3/14/05	Reg. No.	39,400

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Signature			
Typed or printed name	Kathleen Faughnan	Date	March 14, 2005

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PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
<b>FEE TRANSMITTAL for FY 2005</b>		Application Number	09/778,254
		Filing Date	2/7/01
		First Named Inventor	Cimini Jr.
		Examiner Name	John Pezzio
		Art Unit	2682
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	ATT/2000-0192
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		600.00	

**METHOD OF PAYMENT (check all that apply)**
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-0782 Deposit Account Name: Moser, Patterson & Sheridan LLP

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☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s)☒ Credit any overpayments

Under 37 CFR 1.16 and 1.17

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)

Small Entity Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

Multiple dependent claims

200

100

360

180

**Total Claims****Extra Claims****Fee (\$)****Fee Paid (\$)**

11

-20 or HP=

0

x

0

=

0

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims****Extra Claims****Fee (\$)****Fee Paid (\$)**

6

-3 or HP=

3

x

200

=

600.00

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).


Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____	/ 50 = _____	(round up to a whole number) x	= _____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : \_\_\_\_\_

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	39,400	Telephone	(732) 530-9404
Name (Print/Type)	Kin-Wah Tong	Date	March 14, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
<h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">for FY 2005</h3>		Application Number	09/778,254
		Filing Date	2/7/01
		First Named Inventor	Cimini Jr.
		Examiner Name	John Pezzlo
		Art Unit	2662
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	ATT/2000-0192
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$) 600.00	

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-0782 Deposit Account Name: Moser, Patterson & Sheridan LLP

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description		Small Entity	
Fee (\$)		Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)		50	25
Each independent claim over 3 (including Reissues)		200	100
Multiple dependent claims		360	180
Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)
11	-20 or HP= 0	x 0 =	0
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	Extra Claims	Fee(\$)	Fee Paid (\$)
6	- 3 or HP= 3	x 200 =	600.00
HP = highest number of independent claims paid for, if greater than 3.			

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_____	- 100 = _____	/ 50 = _____ (round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : \_\_\_\_\_

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Signature		Registration No. (Attorney/Agent)	39,400	Telephone	(732) 530-9404
Name (Print/Type)	Kin-Wah Tong	Date	March 14, 2005		

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348285-1

PATENT

Atty. Dkt. No. ATT 2000-0192

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:  
Cimini et al.

Serial No.: 09/778,254

Confirmation No.: 6370

Filed: February 7, 2001

For: OFDM Communication  
System and Method Having  
a Reduced Peak-to-  
Average Power Ratio

Group Art Unit: 2662

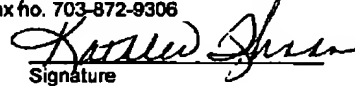
Examiner: J. Pezzlo

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<u>3/14/05</u> Date	 Signature

## RESPONSE TO FINAL OFFICE ACTION JANUARY 14, 2005

In response to the Final Office Action dated January 14, 2005, having a shortened statutory period for response set to expire on April 14, 2005, please enter this response and reconsider the claims pending in the application for reasons discussed below. Although the Applicants do not believe any additional fees are due in connection with this response, the Commissioner is hereby authorized to charge counsel's Deposit Account No. 20-0782 for any fees, including extension of time fees, required to make this response timely and acceptable to the Office.

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